

Please type or print in ink.

Public Document

| | | | |
|---|---------|----------|--------------------------|
| NAME (LAST) | (FIRST) | (MIDDLE) | DAYTIME TELEPHONE NUMBER |
| Cox | Greg | R. | |
| MAILING ADDRESS (Business Address Acceptable) | STREET | CITY | STATE |
| | | | ZIP CODE |
| OPTIONAL E-MAIL ADDRESS | | | |

1. Office, Agency, or Court

Name of Office, Agency, or Court:

San Diego County Board of Supervisors

Division, Board, District, if applicable:

Board of Supervisors

Your Position:

District One Supervisor

► If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)

Agency: _____

Position: _____

2. Jurisdiction of Office (Check at least one box)☐ State☒ County of San Diego☐ City of _____☐ Multi-County _____☐ Other _____**3. Type of Statement (Check at least one box)**☐ Assuming Office/Initial

Date: ____/____/____

☒ Annual: The period covered is January 1, 2009, through December 31, 2009.

-or-

☐ The period covered is ____/____/____ through December 31, 2009.☐ Leaving Office Date Left: ____/____/____ (Check one)☐ The period covered is January 1, 2009, through the date of leaving office.

-or-

☐ The period covered is ____/____/____ through the date of leaving office.☐ Candidate Election Year: _____**4. Schedule Summary**► Total number of pages including this cover page: 16

► Check applicable schedules or "No reportable interests."

I have disclosed interests on one or more of the attached schedules:

Schedule A-1 ☒ Yes - schedule attached
Investments (Less than 10% Ownership)Schedule A-2 ☐ Yes - schedule attached
Investments (10% or Greater Ownership)Schedule B ☒ Yes - schedule attached
Real PropertySchedule C ☒ Yes - schedule attached
Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)Schedule D ☒ Yes - schedule attached
Income - GiftsSchedule E ☒ Yes - schedule attached
Income - Gifts - Travel Payments

-or-

☐ No reportable interests on any schedule**5. Verification**

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed March 2, 2010

Signature _____

(File the original signed statement with your filing official.)

SCHEDULE A-1**Investments****Stocks, Bonds, and Other Interests**

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

GREG COX

▶ NAME OF BUSINESS ENTITY
Ethos Environmental

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Automotive Additive

FAIR MARKET VALUE
☒ Under \$2000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☒ Other **Joint Account**
(Describe)

☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
____/____/09 1/23/09
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Powerwave Technologies

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
wireless communications

FAIR MARKET VALUE
☒ Under \$2000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☒ Other **Spouse's IRA / SEP Account**
(Describe)

☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
____/____/09 ____/____/09
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Nabors Industries, Ltd.

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Oil Drilling

FAIR MARKET VALUE
☒ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☒ Other **Spouse's IRA / SEP Account**
(Describe)

☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
____/____/09 ____/____/09
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Chico's FAS Inc.

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Women's Clothing

FAIR MARKET VALUE
☒ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☒ Other **Spouse's IRA / SEP Account**
(Describe)

☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
____/____/09 ____/____/09
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Medtronic, Inc.

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Cardiac Pacemaker Manufacturer

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☒ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☒ Other **IRA / SEP Account**
(Describe)

☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
____/____/09 ____/____/09
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Wedbush Securities, Inc.

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Spouse's IRA / SEP Investment

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☒ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☒ Other **Spouse's IRA / SEP Account**
(Describe)

☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
____/____/09 ____/____/09
ACQUIRED DISPOSED

Comments:

SCHEDULE A-1**Investments****Stocks, Bonds, and Other Interests**

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

Greg Cox

NAME OF BUSINESS ENTITY
EMC Corp. Mass

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Computer Manufacturer

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☒ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☒ Other **IRA / SEP Account**
(Describe)
☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/09 _____/_____/09
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY
Medco Health Solutions, Inc.

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Pharmacy Benefit Manager

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☒ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☒ Other **Spouse's IRA / SEP Account**
(Describe)
☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/09 _____/_____/09
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY
Fedex Corporation

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Air Express

FAIR MARKET VALUE
☒ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☒ Other **IRA / SEP Account**
(Describe)
☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/09 _____/_____/09
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY
Home Depot, Inc.

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Building Material & Home Improvement Sales

FAIR MARKET VALUE
☒ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☒ Other **Spouse's IRA / SEP Account**
(Describe)
☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/09 _____/_____/09
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY
Johnson and Johnson Common

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Health Care Products

FAIR MARKET VALUE
☒ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☒ Other **Spouse's IRA / SEP Account**
(Describe)
☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/09 _____/_____/09
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY
First Pacific Bancorp

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Community Bank

FAIR MARKET VALUE
☒ **Under \$2000** ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☒ Other **Joint Account**
(Describe)
☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 _____/_____/09 _____/_____/09
 ACQUIRED DISPOSED

Comments: _____

SCHEDULE A-1**Investments****Stocks, Bonds, and Other Interests**

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

Greg Cox

► NAME OF BUSINESS ENTITY
Wedbush Securities, Inc.

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
IRA / SEP Investment

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☒ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☒ Other IRA / SEP Account
(Describe)
☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 / / 09 / / 09
 ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY
Pepsico Incorporated

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Beverage, Restaurant & Snack Foods

FAIR MARKET VALUE
☒ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☒ Other IRA / SEP Account
(Describe)
☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 / / 09 / / 09
 ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY
Digital Angel Corp.

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Computer Hardware

FAIR MARKET VALUE
☒ Under \$2000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☒ Other Spouse's IRA / SEP Account
(Describe)
☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 / / 09 / / 09
 ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY
Qualcomm, Inc.

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Mobile Communications

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☒ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☒ Other Spouse's IRA / SEP Account
(Describe)
☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 / / 09 / / 09
 ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY
Seacoast Commerce Bank

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Community Bank

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☒ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☒ Other Joint Account
(Describe)
☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 / / 09 / / 09
 ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY
Micron Technology, Inc.

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Semi-conductor chip manufacturer

FAIR MARKET VALUE
☒ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☒ Other Joint Account
(Describe)
☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 / / 09 / / 09
 ACQUIRED DISPOSED

Comments:

SCHEDULE A-1**Investments****Stocks, Bonds, and Other Interests**

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

Greg Cox

► NAME OF BUSINESS ENTITY
Copart, Inc.

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Salvage vehicle Recycler

FAIR MARKET VALUE
☒ Under \$2000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☒ Other Spouse's IRA / SEP Account
(Describe)
☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
____/____/09
ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY
NASDAQ Stock Market, Inc.

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Stock Market

FAIR MARKET VALUE
☒ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☒ Other IRA / SEP Account
(Describe)
☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
____/____/09
ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY
Hewlett-Packard Company

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Computers & Printers

FAIR MARKET VALUE
☒ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☒ Other Spouse's IRA / SEP Account
(Describe)
☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
____/____/09
ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY
Covance, Inc.

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Health Care Services

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☒ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☒ Other IRA / SEP Account
(Describe)
☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
____/____/09
ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY
Mattel, Inc.

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Toy Manufacturer

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☒ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☒ Other Joint Account
(Describe)
☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
____/____/09
ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY
Coach, Inc.

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Apparel, Accessories & Luxury Goods

FAIR MARKET VALUE
☒ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☒ Other Spouse's IRA / SEP Account
(Describe)
☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
____/____/09
ACQUIRED DISPOSED

Comments:

SCHEDULE A-1**Investments****Stocks, Bonds, and Other Interests**

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

Greg Cox

▶ NAME OF BUSINESS ENTITY
DIVX, Inc.

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Video Compression Technology

FAIR MARKET VALUE
☒ Under \$2000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☒ Other Joint Account
(Describe)

☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
____/____/09 ____/____/09
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
DIVX, Inc.

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Video Compression Technology

FAIR MARKET VALUE
☒ Under \$2000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☒ Other Spouse's IRA / SEP Account
(Describe)

☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
____/____/09 ____/____/09
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Suntech Power Holdings Company

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Solar Technology

FAIR MARKET VALUE
☒ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☒ Other IRA / SEP Account
(Describe)

☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
____/____/09 ____/____/09
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
GTX, Inc.

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Biotechnology Company

FAIR MARKET VALUE
☒ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☒ Other IRA / SEP Account
(Describe)

☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
____/____/09 ____/____/09
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Pan American Silver, Corp.

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Silver Mining

FAIR MARKET VALUE
☒ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☒ Other IRA / SEP Account
(Describe)

☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
____/____/09 ____/____/09
ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Eagle Bulk Shipping, Inc.

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Bulk Shipping

FAIR MARKET VALUE
☒ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☒ Other IRA / SEP Account
(Describe)

☐ Partnership ☐ Income of \$0 - \$500
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
____/____/09 ____/____/09
ACQUIRED DISPOSED

Comments:

SCHEDULE A-1**Investments****Stocks, Bonds, and Other Interests**

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

Greg Cox

► NAME OF BUSINESS ENTITY
Motorola, Incorporated

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Consumer Electronics

FAIR MARKET VALUE
☒ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☒ Other IRA / SEP Account
(Describe)

☐ Partnership ☐ Income of \$0 - \$500
 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 / / 09 / / 09
ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY
Alcoa, Inc.

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Aluminum Manufacturing

FAIR MARKET VALUE
☒ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☒ Other Joint Account
(Describe)

☐ Partnership ☐ Income of \$0 - \$500
 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
1 / 13 / 09 / / 09
ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY
Alcoa Inc.

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Aluminum Manufacturing

FAIR MARKET VALUE
☒ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☒ Other IRA / SEP Account
(Describe)

☐ Partnership ☐ Income of \$0 - \$500
 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
1 / 13 / 09 / / 09
ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY
Ethos Environmental, Inc.

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Automotive Additive

FAIR MARKET VALUE
☒ Under \$2,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☒ Other Joint Account
(Describe)

☐ Partnership ☐ Income of \$0 - \$500
 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
3 / 12 / 09 / / 09
ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY
Alcoa, Inc.

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Aluminum Manufacturing

FAIR MARKET VALUE
☒ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☒ Other Spouse's IRA / SEP Account
(Describe)

☐ Partnership ☐ Income of \$0 - \$500
 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
1 / 13 / 09 / / 09
ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☐ Other
(Describe)

☐ Partnership ☐ Income of \$0 - \$500
 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 / / 09 / / 09
ACQUIRED DISPOSED

Comments:

SCHEDULE B
Interests in Real Property
(Including Rental Income)

| |
|---|
| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION |
| Name Greg Cox |

► STREET ADDRESS OR PRECISE LOCATION
3217 Columbia Street, #A

CITY
San Diego, CA 92103-5439

FAIR MARKET VALUE
☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☒ \$100,001 - \$1,000,000
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:
____/____/09 ____/____/09
ACQUIRED DISPOSED

NATURE OF INTEREST
☒ Ownership/Deed of Trust ☐ Easement
☐ Leasehold _____ Yrs. remaining ☐ _____ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
Listed as co-owner on daughter's condo (Lender required co-signer)

► STREET ADDRESS OR PRECISE LOCATION

CITY

FAIR MARKET VALUE
☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:
____/____/09 ____/____/09
ACQUIRED DISPOSED

NATURE OF INTEREST
☐ Ownership/Deed of Trust ☐ Easement
☐ Leasehold _____ Yrs. remaining ☐ _____ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE TERM (Months/Years)
_____% ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD
☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000
☐ Guarantor, if applicable

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE TERM (Months/Years)
_____% ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD
☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000
☐ Guarantor, if applicable

Comments:

SCHEDULE C
Income, Loans, & Business
Positions
(Other than Gifts and Travel Payments)

| |
|---|
| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION |
| Name Greg Cox |

► 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

Escape for All Seasons Rentals

ADDRESS (Business Address Acceptable)

P.O. Box 208, Big Bear Lake, CA 92135

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Property Management / rental of Big Bear Condo

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000 ☒ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary ☐ Spouse's or registered domestic partner's income

☐ Loan repayment

☐ Sale of _____
(Property, car, boat, etc.)

☐ Commission or ☒ Rental Income, list each source of \$10,000 or more

☐ Other _____
(Describe)

► 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary ☐ Spouse's or registered domestic partner's income

☐ Loan repayment

☐ Sale of _____
(Property, car, boat, etc.)

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

☐ Other _____
(Describe)

► 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

Seacoast Commerce Bank

ADDRESS (Business Address Acceptable)

296 H Street, Chula Vista, CA

BUSINESS ACTIVITY, IF ANY, OF LENDER

Commercial Bank

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000
☐ \$1,001 - \$10,000
☒ \$10,001 - \$100,000
☐ OVER \$100,000

INTEREST RATE

variable % ☐ None

TERM (Months/Years)

10 years

SECURITY FOR LOAN

☐ None ☒ Personal residence

☐ Real Property 647 Windsor Circle
Street address

Chula Vista, CA 91910

City

☐ Guarantor

☒ Other Home Equity Line of Credit
(Describe)

Comments:

SCHEDULE D
Income – Gifts

► NAME OF SOURCE
Hutchens Public Relations
 ADDRESS (Business Address Acceptable)
550 West C Street, Suite 1850, San Diego
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Public Relations Firm

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---------------------|-----------------|----------------------------|
| <u>01 / 27 / 09</u> | <u>\$ 50.00</u> | <u>S.D. Chamber dinner</u> |
| <u> / / </u> | <u>\$</u> | <u> </u> |
| <u> / / </u> | <u>\$</u> | <u> </u> |

► NAME OF SOURCE
Cox Communications
 ADDRESS (Business Address Acceptable)
350 10th Avenue, San Diego
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
utility

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---------------------|------------------|---------------------------|
| <u>04 / 06 / 09</u> | <u>\$ 135.00</u> | <u>Padres opening day</u> |
| <u>08 / 22 / 09</u> | <u>\$ 80.00</u> | <u>Heroes Event</u> |
| <u> / / </u> | <u>\$</u> | <u> </u> |

► NAME OF SOURCE
San Diego Taxpayers Association
 ADDRESS (Business Address Acceptable)
110 West C Street, Suite 714, San Diego
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---------------------|-----------------|-----------------------------|
| <u>05 / 13 / 09</u> | <u>\$ 50.00</u> | <u>Annual Awards Dinner</u> |
| <u>07 / 17 / 09</u> | <u>\$ 20.00</u> | <u>Luncheon with State</u> |
| <u> / / </u> | <u>\$</u> | <u>Controller</u> |

► NAME OF SOURCE
Pt. Loma Nazarene
 ADDRESS (Business Address Acceptable)
3900 Lomaland Drive, San Diego
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
University

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---------------------|-----------------|-----------------------------|
| <u>03 / 18 / 09</u> | <u>\$ 65.00</u> | <u>Kyoto Symposium gala</u> |
| <u>12 / 18 / 09</u> | <u>\$ 30.00</u> | <u>Chocolate</u> |
| <u> / / </u> | <u>\$</u> | <u> </u> |

► NAME OF SOURCE
McMillin Company
 ADDRESS (Business Address Acceptable)
2750 Womble Road, San Diego, 92106
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
real estate investment/land developer

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---------------------|------------------|---------------------------|
| <u>04 / 18 / 09</u> | <u>\$ 100.00</u> | <u>Scripps Mercy Ball</u> |
| <u> / / </u> | <u>\$</u> | <u> </u> |
| <u> / / </u> | <u>\$</u> | <u> </u> |

► NAME OF SOURCE
Sharp Health Care Foundation
 ADDRESS (Business Address Acceptable)
8695 Spectrum Center Blvd., San Diego
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
health care

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---------------------|------------------|----------------------------|
| <u>05 / 15 / 09</u> | <u>\$ 100.00</u> | <u>Sharp CV Golf Tourn</u> |
| <u> / / </u> | <u>\$</u> | <u> </u> |
| <u> / / </u> | <u>\$</u> | <u> </u> |

Comments: _____

SCHEDULE D **Income – Gifts**

| |
|--|
| CALIFORNIA FORM 700 <small>FAIR POLITICAL PRACTICES COMMISSION</small> |
| Name <div style="text-align: right; margin-top: 10px;">Greg Cox</div> |

► NAME OF SOURCE
Kaiser Permanente
 ADDRESS (Business Address Acceptable)
4647 Zion Avenue, San Diego 92120
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
Health Care

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|----------|------------------------|
| 05 / 07 / 09 | \$ 94.00 | Ticket to UPAC dinner |
| / / | \$ | |
| / / | \$ | |

► NAME OF SOURCE
Karan Cooper
 ADDRESS (Business Address Acceptable)
596 San Elijo Street, San Diego 92106
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|-----------|------------------------|
| 05 / 19 / 09 | \$ 150.00 | 2 tickets to Pt. Loma |
| / / | \$ | Assoc. Annual dinner |
| / / | \$ | |

► NAME OF SOURCE
Japan Society of San Diego and Tijuana
 ADDRESS (Business Address Acceptable)
4883 Ronson Court, Suite K, San Diego
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|----------|------------------------|
| 06 / 12 / 09 | \$ 75.00 | Dinner with Amb. |
| / / | \$ | Ichiro Fujisaki |
| / / | \$ | |

► NAME OF SOURCE
San Diego Regional Economic Devel. Corp.
 ADDRESS (Business Address Acceptable)
530 B Street, San Diego
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|----------|------------------------|
| 07 / 13 / 09 | \$ 80.00 | SDEDC Annual dinner |
| / / | \$ | |
| / / | \$ | |

► NAME OF SOURCE
Bill Lynch
 ADDRESS (Business Address Acceptable)
P.O. Box 2207, Rancho Santa Fe, 92067
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|-----------|-------------------------|
| 10 / 05 / 09 | \$ 110.00 | 2 tickets Bill Kolender |
| / / | \$ | gala |
| / / | \$ | |

► NAME OF SOURCE
Chicano Federation
 ADDRESS (Business Address Acceptable)
3180 University Avenue, Suite 317, San Diego
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|----------|------------------------|
| 09 / 22 / 09 | \$ 55.00 | Chicano Federation |
| / / | \$ | 40 Year Celebration |
| / / | \$ | |

Comments: _____

SCHEDULE D Income – Gifts

| |
|---|
| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name Greg Cox |
|---|

► NAME OF SOURCE
 Downtown San Diego Partnership
 ADDRESS (Business Address Acceptable)
 401 B Street, Suite 100, San Diego 92101
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|----------|------------------------|
| 06 / 17 / 09 | \$ 34.50 | Luncheon |
| 11 / 04 / 09 | \$ 72.97 | Alonzo Awards dinner |
| / / | \$ | |

► NAME OF SOURCE
 South County Economic Development Council
 ADDRESS (Business Address Acceptable)
 1111 Bay Blvd., Suite E, Chula Vista
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|-----------|------------------------|
| 11 / 07 / 09 | \$ 175.00 | San Ysidro Health |
| / / | \$ | Center Gala |
| / / | \$ | |

► NAME OF SOURCE
 Oriental Culture and Media Center San Diego
 ADDRESS (Business Address Acceptable)
 P. Box 12714, La Jolla, 92039
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|-----------|------------------------|
| 12 / 26 / 09 | \$ 200.00 | Shen Yun performanc |
| / / | \$ | |
| / / | \$ | |

► NAME OF SOURCE
 Associated General Contractors
 ADDRESS (Business Address Acceptable)
 6212 Ferris Square, San Diego 92121
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|----------|------------------------|
| 11 / 05 / 09 | \$ 65.00 | Awards luncheon |
| / / | \$ | |
| / / | \$ | |

► NAME OF SOURCE
 Allied Waste
 ADDRESS (Business Address Acceptable)
 8364 Clairemont Mesa Blvd., San Diego 92111
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|----------|------------------------|
| 11 / 05 / 09 | \$ 53.00 | Boy Scouts of America |
| / / | \$ | awards dinner |
| / / | \$ | |

► NAME OF SOURCE
 San Diego County Credit Union
 ADDRESS (Business Address Acceptable)
 5555 Mildred Street, San Diego, 92110
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|-----------|------------------------|
| 12 / 23 / 09 | \$ 140.00 | 2 tickets Poinsettia |
| / / | \$ | Bowl |
| / / | \$ | |

Comments: _____

SCHEDULE D
Income – Gifts

Name

Greg Cox

► NAME OF SOURCE
Pacific Life
ADDRESS (Business Address Acceptable)
P.O. Box 601400, San Diego 92160
BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---------------------|------------------|------------------------------|
| <u>12 / 29 / 09</u> | <u>\$ 100.00</u> | <u>2 tickets to luncheon</u> |
| <u>12 / 30 / 09</u> | <u>\$ 100.00</u> | <u>2 tickets to tailgate</u> |
| <u>12 / 30 / 09</u> | <u>\$ 170.00</u> | <u>2 tks to Holiday Bowl</u> |

► NAME OF SOURCE
Jenkins & Hugin, LLP
ADDRESS (Business Address Acceptable)
1230 Rosecrans Ave., Ste. 110, Manhattan Beach
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Law Firm

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---------------------|-----------------|------------------------|
| <u>08 / 11 / 09</u> | <u>\$ 78.00</u> | <u>dinner</u> |
| <u> / / </u> | <u>\$ </u> | <u> </u> |
| <u> / / </u> | <u>\$ </u> | <u> </u> |

► NAME OF SOURCE
Bill Gore
ADDRESS (Business Address Acceptable)
9621 Ridgehaven Ct San Diego, CA 92123
BUSINESS ACTIVITY, IF ANY, OF SOURCE
Sheriff

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---------------------|-----------------|--------------------------|
| <u>10 / 02 / 09</u> | <u>\$ 55.00</u> | <u>Crime Com. Awards</u> |
| <u> / / </u> | <u>\$ </u> | <u> </u> |
| <u> / / </u> | <u>\$ </u> | <u> </u> |

► NAME OF SOURCE
Asian Business Association
ADDRESS (Business Address Acceptable)
5675 Ruffin Road, Suite 305, San Diego 92123
BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---------------------|------------------|------------------------|
| <u>11 / 12 / 09</u> | <u>\$ 125.00</u> | <u>Annual Dinner</u> |
| <u> / / </u> | <u>\$ </u> | <u> </u> |
| <u> / / </u> | <u>\$ </u> | <u> </u> |

► NAME OF SOURCE
Lincoln Club
ADDRESS (Business Address Acceptable)
5465 Morehouse Drive, Suite 250, San Diego 92121
BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---------------------|------------------|------------------------|
| <u>12 / 10 / 09</u> | <u>\$ 157.77</u> | <u>Christmas Party</u> |
| <u> / / </u> | <u>\$ </u> | <u> </u> |
| <u> / / </u> | <u>\$ </u> | <u> </u> |

► NAME OF SOURCE
22nd District Agricultural Association
ADDRESS (Business Address Acceptable)
2260 Jimmy Durante Blvd., Del Mar
BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|---------------------|------------------|-------------------------------|
| <u>06 / 30 / 09</u> | <u>\$ 137.50</u> | <u>4 tickets to concert</u> |
| <u> / / </u> | <u>\$ </u> | <u>plus admission to fair</u> |
| <u> / / </u> | <u>\$ </u> | <u> </u> |

Comments: _____

SCHEDULE D

Income – Gifts

| | |
|---|--|
| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION | |
| Name | |
| Greg Cox | |

► NAME OF SOURCE
Charles Company

ADDRESS (Business Address Acceptable)
9034 W. Sunset Blvd., West Hollywood, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE
real estate / investment

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|----------|------------------------|
| 09 / 02 / 09 | \$ 50.00 | International Conv. of |
| / / | \$ | shopping ctr. dinner |
| / / | \$ | cruise |

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|-------|------------------------|
| / / | \$ | |
| / / | \$ | |
| / / | \$ | |

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|-------|------------------------|
| / / | \$ | |
| / / | \$ | |
| / / | \$ | |

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|-------|------------------------|
| / / | \$ | |
| / / | \$ | |
| / / | \$ | |

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|-------|------------------------|
| / / | \$ | |
| / / | \$ | |
| / / | \$ | |

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|-------|------------------------|
| / / | \$ | |
| / / | \$ | |
| / / | \$ | |

Comments: _____

SCHEDULE E
Income – Gifts
Travel Payments, Advances,
and Reimbursements

| |
|--|
| CALIFORNIA FORM 700 <small>FAIR POLITICAL PRACTICES COMMISSION</small> |
| Name Greg Cox |

- Reminder – you must mark the gift or income box.
- You are not required to report income from government agencies.

| | |
|--|-----------------|
| ▶ NAME OF SOURCE | |
| California State Association of Counties | |
| ADDRESS (Business Address Acceptable) | |
| 1100 K Street, Suite 101 | |
| CITY AND STATE | |
| Sacramento, CA 95814 | |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE | |
| Advocacy for Counties and their residents | |
| DATE(S): 01 / 01 / 09 - 12 / 31 / 09 | AMT: \$ 3280.69 |
| (If applicable) | |
| TYPE OF PAYMENT: (must check one) <input type="checkbox"/> Gift <input checked="" type="checkbox"/> Income | |
| DESCRIPTION: travel / lodging expenses for meetings - National Association of Counties | |

| | |
|--|-----------------|
| ▶ NAME OF SOURCE | |
| Institute for Local Government | |
| ADDRESS (Business Address Acceptable) | |
| 1400 K Street, Suite 301 | |
| CITY AND STATE | |
| Sacramento, CA 95814 | |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE | |
| Local Government Advocacy | |
| DATE(S): 01 / 01 / 09 - 12 / 31 / 09 | AMT: \$ 1311.48 |
| (If applicable) | |
| TYPE OF PAYMENT: (must check one) <input type="checkbox"/> Gift <input checked="" type="checkbox"/> Income | |
| DESCRIPTION: travel / lodging expenses for meetings (Board of Directors) | |

| | |
|--|-----------------|
| ▶ NAME OF SOURCE | |
| CSAC Finance Corporation | |
| ADDRESS (Business Address Acceptable) | |
| 1100 K Street | |
| CITY AND STATE | |
| Sacramento, CA 95814 | |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE | |
| Financial services for Counties | |
| DATE(S): 01 / 01 / 09 - 12 / 31 / 09 | AMT: \$ 1561.41 |
| (If applicable) | |
| TYPE OF PAYMENT: (must check one) <input type="checkbox"/> Gift <input checked="" type="checkbox"/> Income | |
| DESCRIPTION: travel / lodging expenses for meetings (Board of Directors) | |

| | |
|--|----------------|
| ▶ NAME OF SOURCE | |
| California State Association of Counties | |
| ADDRESS (Business Address Acceptable) | |
| 1100 K Street, Suite 101 | |
| CITY AND STATE | |
| Sacramento, CA 95814 | |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE | |
| Advocacy for Counties and their residents | |
| DATE(S): 01 / 01 / 09 - 12 / 31 / 09 | AMT: \$ 147.14 |
| (If applicable) | |
| TYPE OF PAYMENT: (must check one) <input checked="" type="checkbox"/> Gift <input type="checkbox"/> Income | |
| DESCRIPTION: meals / lodging for Spouse at CSAC Meetings | |

Comments: _____

SCHEDULE E
Income – Gifts
Travel Payments, Advances,
and Reimbursements

| |
|--|
| CALIFORNIA FORM 700 <small>FAIR POLITICAL PRACTICES COMMISSION</small> |
| Name Greg Cox |

- **Reminder – you must mark the gift or income box.**
- **You are not required to report income from government agencies.**

| | |
|--|--|
| <p>▶ NAME OF SOURCE CSAC Finance Corporation ADDRESS (Business Address Acceptable) 1100 K Street CITY AND STATE Sacramento, CA 95814 BUSINESS ACTIVITY, IF ANY, OF SOURCE Financial Services for Counties DATE(S): 01 / 01 / 09 - 12 / 31 / 09 AMT: \$ 313.03 <small>(If applicable)</small> TYPE OF PAYMENT: (must check one) <input checked="" type="checkbox"/> Gift <input type="checkbox"/> Income DESCRIPTION: meals / lodging for Spouse at CSAC Finance Corps meeting</p> | <p>▶ NAME OF SOURCE ADDRESS (Business Address Acceptable) CITY AND STATE BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE(S): ____ / ____ / ____ - ____ / ____ / ____ AMT: \$ ____ <small>(If applicable)</small> TYPE OF PAYMENT: (must check one) <input type="checkbox"/> Gift <input type="checkbox"/> Income DESCRIPTION: _____</p> |
| <p>▶ NAME OF SOURCE ADDRESS (Business Address Acceptable) CITY AND STATE BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE(S): ____ / ____ / ____ - ____ / ____ / ____ AMT: \$ ____ <small>(If applicable)</small> TYPE OF PAYMENT: (must check one) <input type="checkbox"/> Gift <input type="checkbox"/> Income DESCRIPTION: _____</p> | <p>▶ NAME OF SOURCE ADDRESS (Business Address Acceptable) CITY AND STATE BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE(S): ____ / ____ / ____ - ____ / ____ / ____ AMT: \$ ____ <small>(If applicable)</small> TYPE OF PAYMENT: (must check one) <input type="checkbox"/> Gift <input type="checkbox"/> Income DESCRIPTION: _____</p> |

Comments: _____